

ATTACHMENT B

**APPLICATION FOR CERTIFICATE TO BECOME A TELECOMMUNICATIONS
CARRIER**

Docket
SEP 13 10 46 AM '00

ICC Office Use Only

No. _____

Please provide the appropriate information in the () areas in the heading below.

RCN Telecom Services, Inc. :
Application for a certificate of :
interexchange authority to operate :
as a reseller and facilities based carrier :
of telecommunications services in the :
State of Illinois. :

**APPLICATION FOR CERTIFICATE TO BECOME A
TELECOMMUNICATIONS CARRIER**
(Use additional sheets as necessary.)

GENERAL

1. Applicant's Name(including d/b/a, if any)

FEIN # **23-2472885****RCN Telecom Services, Inc.**Address: Street **105 Carnegie Center**City **Princeton** State/Zip **NJ/08540**2. Authority Requested: (Mark all that apply) ☒ 13-403 Facilities Based Interexchange☒ 13-404 Resale of Local and/or **Interexchange**☐ 13-405 Facilities Based Local

3. Request for waivers/variances: In applications for local exchange service authority under Sections 13-404 or 13-405, waivers of Part 710 and of Section 735.180 of Part 735 are generally requested. In applications for interexchange service authority under Sections 13-403 and 13-404, waivers of Part 710 and Part 735 are generally requested. Please indicate which waivers Applicant is requesting and explain why Applicant is requesting each waiver/variance.

☒ Part 710 Uniform System of Accounts for Telecommunications Carriers☒ Part 735 Procedures Governing the Establishment of Credit, Billing, Deposits,
Termination of Service and Issuance of Telephone Directories for Local
Exchange Telecommunications Carriers in the State of Illinois☒ Section 735.180 Directories☐ Other

4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:
- (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document
 - (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document;
 - (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
 - (c) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.

Not Applicable

5. In what area of the state does the Applicant propose to provide service?

RCN TS seeks authority to offer telecommunications services throughout the State of Illinois.

6. Please attach a sheet designating contact persons to work with Staff on the following:

- a) issues related to processing this application
- b) consumer issues
- c) customer complaint resolution
- d) technical and service quality issues
- e) "tariff" and pricing issues
- f) 9-1-1 issues
- g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

Please see Attachment C to the accompanying application.

7. Please check type of organization?

☐ Individual ☒ Corporation
☐ Partnership Date corporation was formed **June 30, 1987**
In what state? **Delaware**
☐ Other (Specify)

7. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois.

Please see Attachment D to the accompanying application.

9. List jurisdictions in which Applicant is offering service(s).

RCN TS is currently offering services in Pennsylvania. RCN TS is seeking certification throughout the United States in conjunction with the proposed reorganization of the RCN Corporation companies. In addition to Illinois, following the completion of the reorganization, RCN TS will be authorized to provide local exchange and/or interexchange telecommunications services in the fifty United States and the District of Columbia.

10. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

_____ YES (Please provide details)

 X NO

11. Have there been any complaints or judgements levied against the Applicant in any other jurisdiction?

_____ YES X NO

If YES, describe fully

12. Has Applicant provided service under any other name?

 X YES _____ NO

If YES, please list.

Applicant has provided service in the Commonwealth of Pennsylvania under its previous name, RCN Telecom Services of Pennsylvania, Inc.

13. Will the Applicant keep its books and records in Illinois? _____ YES X NO

If NO, permission pursuant to 83 Ill. Adm Code Part 250 needs to be requested.

As noted in response to Question 3 above and in the accompanying application, Applicant is requesting authority to maintain its books and records outside of the State of Illinois, at its principal place of business in Princeton, New Jersey.

MANAGERIAL

14. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms.

Please see Attachment E to the accompanying Application.

15. List officers of Applicant.

Please see Attachment E to the accompanying Application.

16. Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services? X YES _____ NO

If YES, list entity. **Level 3 Communications, Commonwealth Telephone Company, Commonwealth Long Distance Company, Inc.**

17. How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.)

RCN TS will either bill customers directly or charges will be billed on the subscriber's telephone bill pursuant to billing and collection agreements established by RCN TS with any applicable underlying carrier(s).

18. How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

RCN TS will maintain a toll-free customer service number to address service, billing and repair complaints. RCN TS's toll-free number is (800) 443-4253. RCN TS's customer service representatives will be available during normal business hours to handle customer inquiries and complaints.

19. Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? ☒ YES ☐ NO

20. What telephone number(s) would a customer use to contact your company?

(800) 443-4253

21. Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?

☒ YES ☐ NO

22. Please describe applicant's procedures to prevent slamming and cramming of customers?

Applicant will comply with Illinois law and the Federal Communication's Commission's ("FCC's") regulations regarding how interexchange carriers may change a consumer's Primary Interexchange Carrier ("PIC"). Applicant will also comply with the FCC's regulations regarding how carriers may change a consumer's primary local exchange provider.

23. If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 735, 755, 756, 757, 770, and 772?

☒ YES ☐ NO (If no, please provide an explanation.)

24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

☒ YES ☐ NO

FINANCIAL

25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.

Please see Attachment F to the accompanying Application.

If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

Applicant initially intends to continue providing the services currently being provided by its affiliate, RCN Long Distance Company.

If NO, which facility provider(s)'s services does the Applicant intend to use?

RCN TS will continue to use the same facility providers currently utilized by RCN Long Distance Company.

27. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).

Applicant will continue to provide the same services currently provided by RCN Long Distance Company. Specifically, Applicant will offer interexchange telecommunications services and alternative operator services throughout the State of Illinois. Applicant's services will be available on a full-time basis, 24 hours a day, seven days a week. Subsequent to demand and overall economic circumstances, Applicant may subsequently offer additional services.

28. Will technical personnel be available at all times to assist customers with service problems?

 X YES NO

29. If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? YES NO

Not Applicable



(Signature of Applicant)

Standard Questions for Applicants Seeking Local Exchange Service Authority

[This Section is Not Applicable]

1. Is your company seeking any waivers or variances of certain Commission rules and regulations in this proceeding that pertain to local exchange service? Please provide evidence as to why your company is seeking any waiver or variance.
2. Will your company comply with 83 Illinois Administrative Code Part 772, Pay-Per-Call Services, including Part 772.55(a)(1), Billing and Part 772.100(d) Notices?
3. Will your company comply with 83 Illinois Administrative Code Part 705, Preservation of Records of Telephone Utilities?
4. Will your company abide by 83 Illinois Administrative Code Part 735, "Procedures Governing the Establishment of Credit, Billing, Deposits, Termination of Service and Issuance of Telephone Directories for Telephone Utilities in the State of Illinois"?
5. Who will provide customer repair service for your company?
6. How many people does the company employ?
7. Will your company meet the requirements as they pertain to the Telephone Assistance Programs imposed by Sections 13.301 and 13.301.1 of the Illinois Public Utilities Act and 83 Illinois Administrative Code Part 757?
8. Will your company solicit, collect, and remit the voluntary contributions from its telephone subscribers to support the Telephone Assistance Programs?
9. Does your company plan on filing to become an Eligible Telecommunications Carrier?
10. Does the company realize that it will not be able to receive any of the federal reimbursements for the Lifeline and Link Up Programs if it is not an eligible carrier?
11. Will your company offer all of the waivers associated with the Universal Telephone Service Assistance Programs (UTSAP)?
12. Will your company abide by the regulations as prescribed in 83 Illinois Administrative Code Part 755, "Telecommunications Access for Persons with Disabilities," 83 Illinois Administrative Code Part 756 "Telecommunications Relay Service," and Sections 13-703 of the Illinois Public Utilities Act?
13. Will the company's billing system be able to distinguish between resale and facilities based service for the collection of the ITAC line charge?
14. Has your company signed and return the Universal Telephone Assistance Corporation ("UTAC") and the Illinois Telecommunications Access Corporation ("ITAC") to Commission staff?
15. How does your company plan to solicit customers once it begins to provide local service?
16. Has your company provided service under any other name?
17. Have any complaints or judgements been levied against the company? (Instate, out-of-state, or FCC).

9-1-1 Questions for Applicants Seeking Local Exchange Service Authority

[This Section is Not Applicable]

1. Will your company ensure that 911 traffic is handled in accordance with the 83 Illinois Administrative Code Part 725 and the Emergency Telephone System Act?
2. Will your company contact and establish a working relationship with the 911 systems when you begin to provide local telephone service?
3. Will your company coordinate with the incumbent LEC(s) and local 911 systems to provide transparent service for your local exchange customers?
4. Who will be responsible for building and maintaining the 911 database for your local exchange customers?
5. How often will your company update the 911 database with customer information?
6. Will your company's billing system have the ability to distinguish between facilities based and resale for the collection of the 911 surcharge?
7. Does your company have procedures for the transitioning of the 911 surcharge collection and disbursement to the local 911 system?
8. Will your company's proposal require any network changes to any of the 911 systems?
9. Will your company be able to meet the requirements specified under Part 725.500(o) and 725.620(b) for the installation of call boxes?
10. Does your company plan to file for a waiver of Part 725.500(o) and 725.620(b) in the future?

Financial Questions for Applicants Seeking Local Exchange Service Authority

1. (Answer if requesting waiver of Part 710) What circumstances warrant a departure from the prescribed Uniform System of Accounts ("USOA")?

Applicant does not currently maintain USOA and it would be unduly burdensome and costly for Applicant to revise its current accounting system.

2. Will records be maintained in accordance with Generally Accepted Accounting Principles ("GAAP")?

Yes

3. Will applicants accounting system provide an equivalent portrayal of operating results and financial condition as the USOA?

Yes

4. Will applicants accounting procedures maintain or improve uniformity in substantive results as among similar telecommunications companies?

Yes

5. Will applicant maintain its records in sufficient detail to facilitate the calculation of all applicable taxes?

Yes

6. Does the accounting system currently in use by applicant provide sufficiently detailed data for the preparation of Illinois Gross Receipts Tax returns? What specific accounts or sub-accounts provide this data?

Yes. Accounts 105; 1210, subaccount 106; 1605, subaccount 106; 1610, subaccount 106.

7. If a waiver of Part 710 is granted, will applicant provide annual audited statements or all periods subsequent to granting of the waiver?

Yes

8. Does applicant agree that the requested waiver of Part 710 will not excuse it from compliance with future Commission rules or amendments to Part 710 otherwise applicable to the Company?

Yes

9. Please attach a copy of applicant's chart of accounts.

Please see Attachment G to the accompanying Application.

**Prepaid Service Questions for Applicants Seeking Local Exchange Service
Authority**

[This section is Not Applicable]

1. Will customers have the ability to sign up with any long distance company they choose?
2. Will customers have the ability to use dial around long distance companies?
3. Does the applicant have interexchange authority in Illinois? If yes, please provide the docket number.
4. Will customers have access to the Illinois Relay Service?
5. Will customers be able to make 1-800 calls for free?
6. Will the Company offer operator services?
7. Please describe how applicant plans to collect the monthly fee to be paid in advance.
8. Will customers' monthly bills show a breakdown of services, features, surcharges, taxes, etc.?
9. Will customers pay an installation fee? If yes, will payment arrangements be offered for the installation fee?
10. Will telephone service be in the Company's name or the customer's name. If in the Company's name how will information appear in data bases, such as 9-1-1, directory assistance, etc.?
11. Will applicant offer prepaid service as a monthly service or as a usage service?
12. Will applicant provide a warning when the remaining value of service is about to cease?
13. Is the customer given more than one notice of the remaining value of service?
14. How much advance notice is given to the customer of the remaining value of service?
15. If the customer is in the middle of a call will they be disconnected when the remaining value of service has expired?
16. Has the customer been made aware of potentially being disconnected during a call when the remaining value of service expires?
17. When does the timing of a call start?
18. If the person called does not answer, is any time deducted from the customer's account?
19. Will there be any other instances in which the Company would disconnect a customer, other than running out of prepaid time?
20. When a customer runs out of time is their phone immediately disconnected or on suspension? (Will they still be able to receive calls?)
21. Are applicant's services available to TTY callers?

22. How will the applicant handle a complaint from a customer who disputes the amount of time used or remaining?
23. The Public Utilities Act requires a local calling area that has no time or duration charges. How will the Company define each customer's untimed local calling area?